CPT Shawn DeFries
Ms Lynnda Henson

Medical Evaluation Boards (MEBs)

Madigan Army Medical Center

GOALS for Today's Briefing

- Introduce MAMC Staff & Mission.
- Provide a quick overview of the Medical Evaluation Board (MEB)/ Physical Evaluation Board (PEB) Process
- Answer common MEB/PEB questions

A Few ACRONYMS

MEB = Medical Eval Board

PEB = Physical Eval Board

PEBLO = PEB Liaison Officer

NARSUM = Narrative Summary

PDA = Physical Disability Agency

MEBC = Medical Evaluation Board Clerk

MEBT = Medical Evaluation Board Technicians

The MAMC MEB Staff

Lynnda Henson 968-1683
Chief, Patient Affairs

Debbie Burnham 968-2026
Lead PEBLO

The MAMC MEB Staff (con’d)

Medical Board Technicians: Make appointments, track board through the process.

- Mrs. Paige MEBT A-E 968-1638
- Mrs. Coleman MEBT RC 968-5057
- Mrs. Edwards MEBT F-M 968-5058
- Mr. DerMEBT N-Z 968-3438

The MAMC MEB Staff (con’d)

- **Physical Evaluation Board Liaison Officers (PEBLOs): Review board packet, counsel Soldiers on benefits and appeals.**
  - Ms. Burnham A-B & MED HOLD
  - Ms. Miracle C & CBHCO
  - Ms Johnson D & 654th
  - Ms. High E-F & TDRLs A-L
  - Ms Levene G-M
  - Ms Robinson N-Z
  - Ms Gorden RC I-L & TDRLs M-Z

Office Hours

0730-1600 Hrs

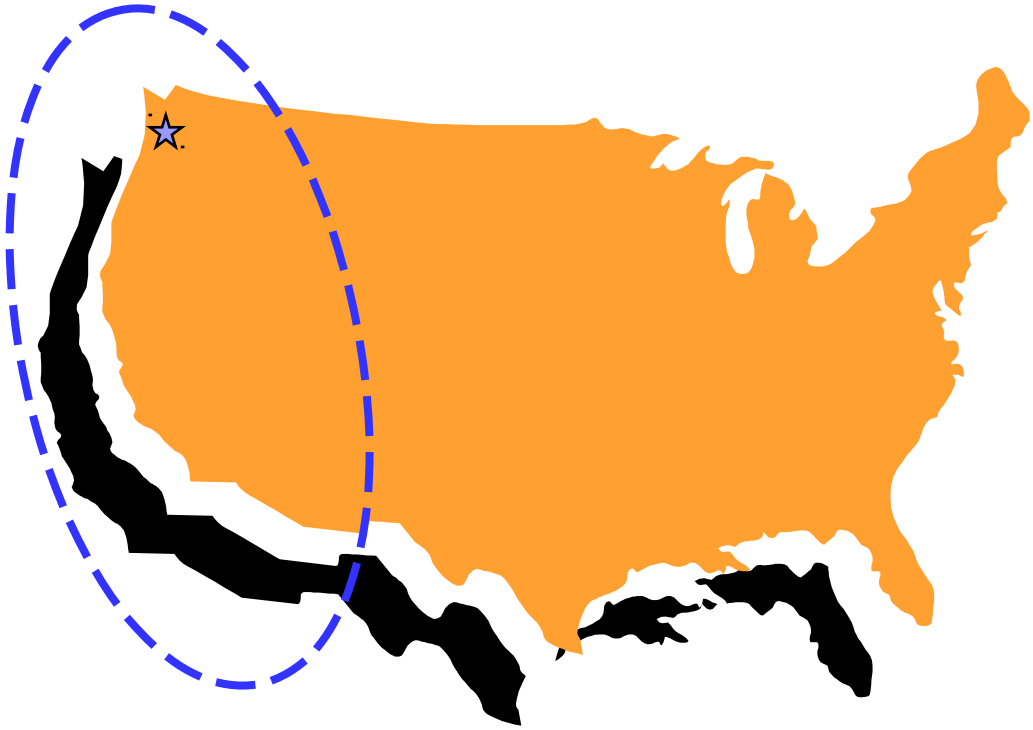
- **Walk- In Hours: 1000 – 1600 Hrs**
  - **CLOSED EVERY THURSDAY**

CLOSED on Federal Holidays

**** Inclement Weather****

Our Mission

- Washington
- Oregon
- Idaho
- Nevada
- California (Certain Areas)



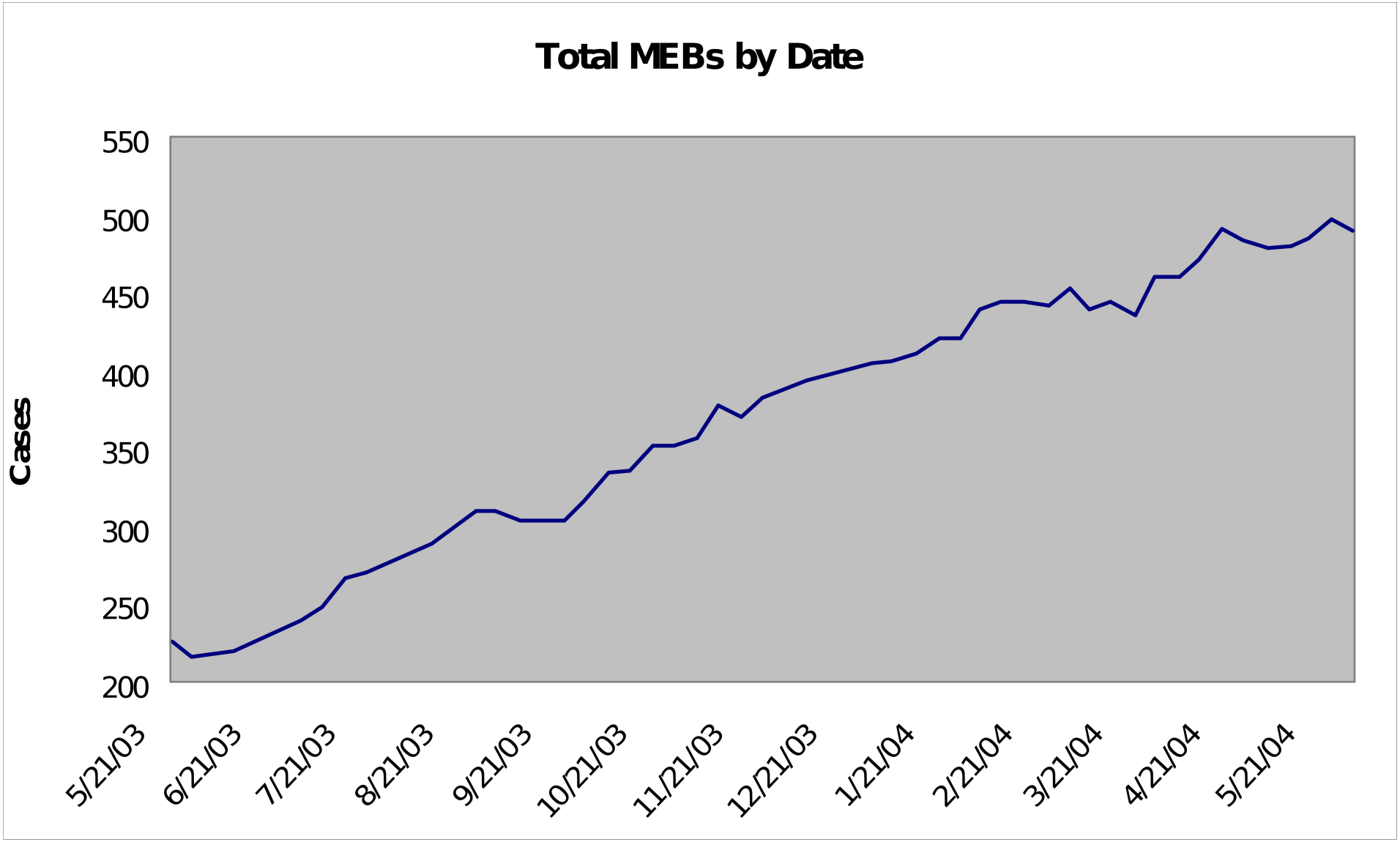
Our Customers

- ACTIVE DUTY

(Army, Navy, Air Force, Marines, Coast Guard)

- RESERVE COMPONENTS
- MEMBERS ON TDRL
- PUBLIC HEALTH
- NATIONAL OCEANGRAPHIC ATMOSPHERIC ASSOCIATION (NOAA)

MEB Workload



Our Address

MADIGAN ARMY MEDICAL CENTER
ATTN: MCHJ-PDP (PEBLO)
9040 REID STREET
TACOMA, WA 98431
(253)968-5057/8

FAX: (253) 968-1678/1888
DSN 782-1678/1888

Confidentiality & HIPAA

- Health Insurance Portability & Accountability Act.
  - Significant Restrictions on Protected Health Information that can be released without authorization
  - Military Clause
- The Soldier's medical board is personal and private.
  - IF SOLDIER IS A MEDICAL BOARD
  - WHAT IS THE BOARD'S CURRENT STATUS
  - IF SOLDIER WAS FOUND FIT OR UNFIT

KEEP EVERYONE CONCERNED INFORMED.

What is a Medical Board?

It is a “word picture” of the soldier’s medical condition, military history and lifestyle.

A Medical Board is NOT...

- An MOS reclassification Board - any MOS reclassification would have occurred at the MMRB.

- The soldier WILL NOT sit in front of a panel of board members. The MEB is simply a Doctor's evaluation and recommendation.

MEB Processing Time

- **Goal = 90 days**
  - **MEB Initiation to PEB**

- **Average Processing Time:**
  - **Dec 06 = 83 days**
  - **Jan 07 = 85 days**
  - **Feb 07 = 87 days**

- **Common Delays:**
  - **Case Complexity – Multiple Diagnoses**
  - **Personnel Data**
  - **Optimum Care**

Does not include PEB processing, appeals, or Orders Processing

MEB Initiation

Medical Board Section receives notification Soldier will be a board by:

1. **Fit for Duty Request**
2. **MMRB**
3. **Doctor Notification**

Basic Steps to the MEB Process

1. MEB Initiation
2. Soldier Briefing & Unit Notification
3. Physical Exam
4. Consults / Appointments
5. NARSUM Appt
6. Final Signatures on MEB
7. PEBLO Counseling to Soldier ★
8. MEB to the PEB
9. PEB Results ★
10. To the PDA

★ **Potential Appeal**

Board process (continued)

- Soldier is telephonically contacted by the Medical Clerk to come the Madigan to start his/her board.

- Soldier completes paperwork (2807 & 2808) and Information worksheet.

Board process (continued)

- Soldier is given schedule of appointments
  - Briefing (by PEBLO Tues 0900-1130)
  - Physical Examination ****
  - Eye Examination
  - Hearing Test
  - Dental Appointment
  - Board Doctor Appointment (NARSUM)

**** **May generate consult(s) to another clinic**

Board process (continued)

- Board Doctor receives all paperwork (to include any consults required).
- Doctor dictates NARSUM
- Transcription provides NARSUM draft to Medical Clerk
- Medical Clerk reviews/corrects NARSUM draft, prepares MEB coversheet and Profile
- Medical Clerk forwards final MEB to doctor for review and final signatures (2 are required)

Board process (continued)

- Medical Clerk receives signed/completed board from the doctor and forwards to PEBLO.
- PEBLO reviews board for administrative accuracy then forwards to DCCS (or designee).
- DCCS reviews for medical accuracy, signs board and returns to PEBLO.

Board process (continued)

- PEBLO contacts soldier to review board.
- ** Soldier signs board.
- Board is forwarded to PEB for adjudication.
- PEB returns finding to PEBLO (via FAX)
- PEBLO contacts soldier to review findings
- **Soldier signs findings

- ** **Soldier is entitled to review time and appeal process**.

Board process (continued)

- Signed findings are forward (via FAX) to PEB for further processing (to USAPDA)
- If fit: DA Letter of Fitness is forwarded to MEB office.
- If unfit: DA places soldier in TRANSPROC system for separation/retirement.
- Unit Commander determines specific separation/retirement date (90 day window)

COMPLETED PEB PACKET

1. MEB Packet
2. Personnel Data
3. Health Record

PEB Findings

- Fit
- Unfit
  - Disability %
  - With or Without Severance

“UNFIT for DUTY”

- **When the PEB determines UNFIT for DUTY, they also determine the % of unfitness.**

----% Existed Prior to Service (EPTS)

0% - 20% Severance Pay Calculation

30% or ↑ Medical Retirement

Existed Prior to Service (EPTS)

- Separation is given without Disability Benefits (monetary or medical)
- “8 Year Rule” Exception

*****LIMITED BENEFITS ARE GIVEN THROUGH INVOLUNTARY SEPARATION**

*****SEE TRANSITION POINT WALLER HALL**

0 - 20 % -Severance Pay

- Severance Formula
  - Same for 0%-20%
  - 2 x #Yrs (up to 12) x Base Pay

Example: 6 Years 10 Months Active Service Would Be

2 X 7 X Base Pay = $$$

- Medical benefits for 6 Months

Medical Retirement (30% or ↑)

- 2 Types:
  - Temporary Disability Retirement List (TDRL)
    - Re-evaluated every 12 to 18 months
    - Can be retained a maximum of 5 years
  - Permanent Disability Retirement List (PDRL)
    - Permanent Retirement

PCS

- Soldiers who come down on PCS orders or are currently on orders cannot PCS until the Medical Board is complete.

NOTIFY SOLDIER'S MEDICAL CLERK IMMEDIATELY

- The medical clerk will obtain the paperwork necessary to delete or defer PCS orders until the board is complete

ETS

- Soldiers can be retained medically for the purpose of completing the medical evaluation board.
- The PEBLO is responsible for processing the retention for the soldier, ***NOT THE UNIT***.
- NOTIFY PEBLO 30 Days PRIOR to ETS

ENLISTED - 6 month Interval

OFFICER - 3 month Interval

Retirement

- Soldiers who have submitted for retirement and have received orders will have their orders revoked until completion of the Medical Board.

Leave

- If the Soldier is separated or retired, (S)he will have to sell back his/her leave.
- Any leave over 60 days (or if soldier previously sold back leave) will be given to you as transition leave.
- The Commander CAN authorize up to 20 days permissive TDY.

Medical Holding Company

"The decision to assign a soldier to the Medical Holding Company will be based on whether the individual may render **productive service** to the parent unit while undergoing disability processing"

MAMC Med Hold 968-4200/4198

AR 635-40 and AR 40-3

How can the unit assist in processing the Medical Board?

PTSD (Post Traumatic Stress Disorder)

- "A verified, credible traumatic event (stressor) in which the soldier experienced, witnessed or was confronted with actual or threatened death or serious injury or threat the physical integrity of the Soldier or of others."

- **NOTE: Combat does not automatically justify a diagnosis of PTSD**

****Excerpt from PEB Policy Memorandum #5 dtd 3 February 2005**

PTSD
Types of Verification

- Input from your in-theater commander
- Completed LOD w/sworn statements

Personnel Data

- ERB/ORB
- Disciplinary Action Statement completed by the custodian of your 201 file (PSB)
- Commander's Evaluation Letter
- NCOERs/OERs (E-5 And above) (Last 3)
- APFT SCORECARD (Last 3 years)
- Enlistment Contract (First Termers Only)
- 4187 (Name changes, loss of rank, promotions, etc)
- LES (Current End of Month)

DEPARTMENT OF THE ARMY
MADIGAN ARMY MEDICAL CENTER
TACOMA, WASHINGTON 98431-1100

S: 9 May 2000

MCHJ -PDP (40-3R) **May 8, 2000**

MEMORANDUM FOR COMMANDER, B CO 29th Sig BN, Ft Lewis, WA 98433

SUBJ ECT: Request for Medical and/or Administrative Records

1. This is to inform you that _____, a member of your command, will be evaluated by a medical board U/P AR 40-3 and AR 40-501.

2. Request the documents checked below be handcarried, without delay, to the PEBLO, Patient Administration Division, MAMC, for evaluation by the medical board. Prompt action is required in order that final action may be expedited. Evaluation by the medical board cannot be accomplished until these items are available. (See para 4-15, AR 635-40.)

☐ **a. Four legible copies of DD Forms 4-1 through 4-3 - Record of Enlistment.**

☒ **b. Four legible copies of DA Forms 2-A and 2-1 OR ERB. (If officer, Furnish ORB)**

☐ **c. Copy of Appointment Letter and Active Duty Orders (Officers).**

☒ **d. Statement by the custodian of members records that an unfavorable action as defined by AR 600-8-2 is not pending. (Statement enclosed)**

☒ **e. A special letter of evaluation by service member's commander or rater (preferably, both) describing in detail the garrison and field duties required by service member's MOS, grade, and position and explaining the effects of service member's condition and profile limitations on the performance of these specific duties. (SEE ATTACHED SAMPLES.)**

Except for the medical evidence presented in the Medical Evaluation Board (MEB), this Commander's Letter is the single most important document to be considered by the Physical Evaluation Board (PEB). Remember that medical evidence alone may not be sufficient to support a finding of unfitness. The medical evidence must be correlated with duty performance limitations.

Flags or UCMJ?

- Court martial procedures can stop the medical board.
- Chapter 14 is done in conjunction with the medical board. Which action has precedence will be determined once the MEB is completed.
- All other Chapters are put on hold until the Medical Board is completed.
- Immediately report any flags or adverse actions to the PEBLO

Availability

- Soldier must remain available.
- When field assignment is pending, contact soldier's PEBLO to coordinate where the soldier needs to be.
- Leave must be coordinated with SMs PEBLO prior to unit approval.

Unit Stats Report

- Provided weekly to I Corps Surgeon
  - CPT Eichost – erik.eichost@lewis.army.mil
    - 968-3861
  - MEB Roster
  - Permanent Profiles
  - Patient No-Shows
    - 1 No show requires escort
    - UCMJ

Questions